

BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: September 15, 2004

Division: Public Safety

Bulk Item: Yes X No

Department: Medical Examiner

AGENDA ITEM WORDING:

Approval to extend Agreement with Seven Seas Funeral Home Cemetery and Cremation Services, Inc. to sub-lease premises for use as Medical Examiner facilities on a month-to-month basis, effective October 1, 2004, at \$800.00 per month, total of \$9,600.00 per year

ITEM BACKGROUND:

The Medical Examiner uses the Seven Seas Funeral Home cemetery and Cremation Services, Inc., Big Pine Key, to perform autopsies and post mortem examinations for some cases that originate in the Middle Keys area. The current agreement expires September 30, 2004. Until the new facility is built, the Medical Examiner will continue to use the funeral homes to perform autopsies and post mortem examinations.

PREVIOUS RELEVANT BOCC ACTION:

On October 16, 2002, the Board approved a Lease Agreement with Dean and Sons Funeral Home, to lease premises for use as Medical Examiner facilities for a one year period, effective October 1, 2002, at \$800.00 per month, total of \$9,600.00 per year. On July 15, 2003, Board approved Renewal Agreement for lease of medical examiner facilities for an additional one year period, effective October 1, 2003, at \$800.00 per month, total of \$9,600.00 per year. On February 18, 2004, Board approved Amendment to Agreement to provide that the sub-lessor's name be changed to Seven Seas Funeral Home, Cemetery and Cremation Services, Inc.

CONTRACT/AGREEMENT CHANGES:

STAFF RECOMMENDATIONS: Approval

TOTAL COST: \$9,600.00 per year

BUDGETED: Yes X No

COST TO COUNTY: \$9,600.00 per year

SOURCE OF FUNDS: Medical Examiner's Budget – Ad Valorem

REVENUE PRODUCING: Yes No ☒ X

AMOUNT PER MONTH	Year
100	1990
100	1991
100	1992
100	1993
100	1994
100	1995
100	1996
100	1997
100	1998
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APPROVED BY: County Atty N/A OMB/Purchasing N/A Risk Management N/A

DIVISION DIRECTOR APPROVAL:

James R. "Reggie" Paros

DOCUMENTATION: Included

To Follow

Not Required X

DISPOSITION: _____

AGENDA ITEM #